

## CITY AND COUNTY OF MONTGOMERY PERSONNEL

27 Madison Avenue Montgomery, AL 36104

Jobline: 334/241-2217 Telephone: 334/241-2675 Fax: 334/241-2219

[www.montgomerypersonnel.com](http://www.montgomerypersonnel.com)**RADIO COMMUNICATIONS SUPERVISOR****\$47,761 - \$67,990****09CI2551****7/31/09**

**NATURE OF WORK:** The fundamental reason this position exists is to manage the Radio Communications Division operations and provide technical oversight and management in the construction, operation, maintenance and testing of radio communications network infrastructure and equipment. The employee is responsible for supervising the operation and maintenance of all radio transmitting and receiving equipment used by city agencies and the Montgomery Metro Communications Cooperative District. Work is performed under general administrative supervision, but the employee is responsible for the satisfactory operation and management of all aspects of the City's radio communication's assets. Most assignments and priorities are determined by the employee on the basis of trouble reports from person using the equipment, inspections by the employee or his assistants, or project management objectives. Supervision is exercised over all Radio Communication Division employees. This position reports to the Deputy Director of Communications.

**MINIMUM QUALIFICATIONS:** Must have an Associates Degree in Electronics or a related field and five (5) years of recent progressively responsible experience in the installation, repair and maintenance of a wide variety of both system and subscriber two-way radio equipment including the use of PC based software to troubleshoot, program and analyze the equipment. Must have at least two (2) years of supervisory experience to include supervising radio communications employees, and/or planning and leading communications projects, and contract negotiation and/or administration OR an equivalent combination of education and experience. Experience may be substituted for education on a year for year basis. **NOTE:** An EDACS System Administration Certification is preferred. **SPECIAL REQUIREMENTS:** Must be willing to be on-call on a rotational basis for emergencies. Must submit to a background check. Must obtain a State of Alabama driver's license to operate city vehicles upon hire.

**HOW TO APPLY:** A *standard application form* may be obtained from the Montgomery City-County Personnel Department, state-operated Career Centers, or downloaded from the Personnel website. A resume may be attached to the application, but will not be accepted in the place of a completed application form. The application must be filed with the Montgomery City-County Personnel Department, 27 Madison Avenue, Montgomery, AL 36104. No person or departments are authorized to accept applications except the Personnel Department. Applications may be delivered in person, by hand-mail, by the U.S. postal service or any other mail delivery service, by facsimile (334-241-2219) *or through the on-line application process at [www.montgomerypersonnel.com](http://www.montgomerypersonnel.com).*

**CLOSING DATE:** Completed application and supplemental questionnaire will be accepted until **5:00 p.m., August 20, 2009.**

**KIND OF EXAMINATION:** To establish an employment register to fill one vacancy and any vacancies that may occur in the future with the **City of Montgomery, Communications Department**. Applicants will be screened and qualified based on education and experience as shown on the application and supplemental questionnaire. For this reason, applicants are urged to fill in the application form completely providing detailed information concerning the kinds of jobs they have held, the dates they held them, where and exactly what their duties were. If there are more than five qualified applicants, the supplemental questionnaire will be scored and a structured oral interview will be administered in order to rank applicants on the employment register, and tied scores will not be broken. Study materials will be provided to qualified applicants. If there are five or less qualified applicants, they will be considered equally qualified and placed on the register in alphabetical order.

**BENEFITS:** Employees are offered a competitive benefits package which includes health, dental, and life insurance, paid annual and sick leave, paid holidays, and a retirement program.

**EMPLOYMENT WITH THE CITY OF MONTGOMERY IS CONDITIONAL UPON THE POTENTIAL EMPLOYEE PASSING A PRE-EMPLOYMENT DRUG TEST.**  
(The drug test may require the submission of a sample of hair, finger nails, and/or urine that will verify illegal drug use.)

**Equal Employment Opportunity Policy & General Information - See reverse side**

**GENERAL INFORMATION**  
**MONTGOMERY CITY AND COUNTY MERIT SYSTEM EXAMINATION**

PRIOR TO YOUR EMPLOYMENT, YOU WILL BE REQUIRED TO PROVIDE TO YOUR EMPLOYER DOCUMENTATION OF YOUR IDENTITY AND EMPLOYMENT ELIGIBILITY IN ORDER TO COMPLY WITH THE IMMIGRATION REFORM AND CONTROL ACT OF 1986.

**EQUAL EMPLOYMENT OPPORTUNITY**

Discrimination against any person in recruitment, examination, appointment, training, promotion, retention, discipline, or any other aspect of personnel administration because of political or religious opinions or affiliations or because of race, national origin, or any other non-merit factors is prohibited. Discrimination on the basis of age, sex, or physical disability is prohibited except where specific age, sex, or physical requirements constitute a bona fide occupational qualification necessary to proper and efficient administration.

**REQUEST FOR ACCOMMODATION**

Under the Americans with Disabilities Act, it is the responsibility of the applicant with a disability to request accommodation which he/she requires in order to participate in the application or examination process. The Personnel Department reserves the right to require documentation of the need for accommodation under the ADA. In order to request accommodation in the application or testing process, contact the Personnel Director or Assistant Personnel Director at (334) 241-2675.

**HOW DOES A PERSON QUALIFY?**

Each person must meet the requirements listed in the MINIMUM QUALIFICATIONS part of the examination announcement. DESCRIBE YOUR QUALIFICATIONS AS COMPLETELY AND ACCURATELY AS POSSIBLE. Applications must be completely filled out and received in the Office of the Personnel Department, 27 Madison Avenue, not later than 5:00 P.M. on the closing date specified on the front of this announcement. Applications may be delivered in person, by hand-mail, by the U.S. Postal Service or any other mail delivery service, or by facsimile. Late applications and applications containing false statements will result in disqualification. You will be notified of acceptance of your application.

**EXAMINATION**

The examination may consist of a written test, a performance test, an evaluation of training and experience, an oral examination, or a combination of these. Applicants who meet the minimum qualifications will be notified when and where to report for examination, if required.

**ELIGIBLE REGISTERS**

Candidates who successfully complete all phases of the examination process are placed on a register of eligible candidates and will be notified of their standing on the Eligible Register as soon as practicable. Register information is not given out over the phone in order to protect candidate privacy. Candidates who are not available for employment or refuse employment may be placed in inactive status. Requests to be placed back on active status will be granted when the candidate is available for employment IF made in writing and IF the register is still active.

**APPOINTMENT**

Appointments are made by the City, County, Housing Authority, and Airport Authority, not the Personnel Department. When a vacancy occurs, the eligible register containing the names of the appropriate number of eligible candidates is provided to the requesting department by the Personnel Department for selection. Applicants who are not selected or who are not removed from the register remain on the Eligible Register for a maximum of two years or until there are less than five eligible candidates to select from and a new register must be established. Appointments are ordinarily made at the minimum salary of the salary range for the class.

**WHAT IS THE PROBATIONARY PERIOD?**

All appointments to permanent positions are made for a probationary period of not less than six months, except police officers who have a one-year probationary period. This working test period is to determine if the work and work habits of the employee are satisfactory and if the employee merits permanent appointment.

**RADIO COMMUNICATIONS SUPERVISOR - 09CI2551**

**SUPPLEMENTAL QUESTIONNAIRE**

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**INSTRUCTIONS:** This Supplemental Questionnaire will be used, along with the City/County Application and any other attachments, to determine if you meet the minimum qualifications. If more than five (5) qualified applications are received, this Questionnaire will be scored along with an oral interview, and will be used to rank order the qualified applicants on the eligible register. **While you must list your entire work history on the application form, you must restate the requested information in the format requested in the Supplemental Questionnaire to receive proper credit. Also, any employer/organization (paid or volunteer) listed on the Supplemental Questionnaire must be listed on the application form.** You may attach one (1) additional sheet as needed to respond in detail to each question. Please provide the school/employer and dates of attendance/employment for each question. The Supplemental Questionnaire must be completed and returned with your City/County Application to the Montgomery City-County Personnel Department no later than **5:00 p.m., August 20, 2009**. If you have questions about this questionnaire, please call the Personnel Department at (334) 241-2675.

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**NAME: (Print)** \_\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**TELEPHONE NUMBERS: HOME** \_\_\_\_\_ **CELL:** \_\_\_\_\_

**Your Agreement: (Read)**

By submission of this supplemental questionnaire to the application form, I hereby certify that all information on this supplemental questionnaire and any attached sheets are accurate and complete to the best of my knowledge and belief.

1. Describe your experience in managing radio communication operations of a department or an organization. Include in your response your specific responsibilities and the types of functions you were responsible for including overall in house maintenance of multi-channel systems.

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**NAME OF EMPLOYER:**

**DATES OF EMPLOYMENT: From** (Month/Year)

**To** (Month/Year)

2. Describe your experience in supervising Radio Communication employees. Include in your response your specific responsibilities for various supervisory functions to include performance appraisal, hiring, firing and/or disciplinary actions.

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**NAME OF EMPLOYER:**

**DATES OF EMPLOYMENT: From** (Month/Year)

**To** (Month/Year)

**- OVER -**

**3. Describe your experience in supervising the building, rebuilding, installing, servicing and repairing of stationary and mobile radio transmitting and receiving apparatus, antennae, frequency monitors or related equipment. Include in your response:**

- the types of communications equipment you have built or supervised others in building
- the tools and equipment you have utilized
- your experience with TRUNKED radio systems

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**NAME OF EMPLOYER:**

**DATES OF EMPLOYMENT: From (Month/Year)**

**To (Month/Year)**

**4. Describe your experience in performing administrative radio communications duties. Include in your response your responsibilities for administrative duties such as inventorying, ordering equipment and supplies and/or keeping current on new technology.**

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**NAME OF EMPLOYER:**

**DATES OF EMPLOYMENT: From (Month/Year)**

**To (Month/Year)**

**MONTGOMERY CITY-COUNTY PERSONNEL DEPARTMENT**

**Application for Employment**

**27 Madison Avenue**

**Montgomery, AL 36104**

**Jobline (334) 241-2217 Fax (334) 241-2219 Telephone (334) 241-2675**

**[www.montgomerypersonnel.com](http://www.montgomerypersonnel.com)**

**General Instructions:** Applications are only accepted for a position **when** a job announcement is posted. Read the job announcement to determine if you meet the minimum qualifications for the position. A separate Montgomery City-County application form must be submitted for each position. Copies are accepted. A resume may be attached, but may not take the place of the Montgomery City-County Application. An application or resume cannot be returned and the Personnel Department cannot make copies for you. Please type or write clearly in blue or black ink.

The completed application and supplemental questionnaire, if any, must be filed with the Montgomery City-County Personnel Department. No other persons or department are authorized to accept applications except the Personnel Department. Applications may be delivered in person, by hand-mail, by the U.S. Post Office or any other mail delivery service, or by facsimile. It is up to you to ensure that your application is received by the closing date listed on the job announcement. If an announcement is "open until the needs are met" the Personnel Department may stop accepting applications for the position at any time without further notice.

According to the Americans with Disabilities Act, it is the responsibility of the applicant with an ADA-covered disability to request accommodation which he/she requires in order to participate in the application or examination process. It is the policy of the Personnel Department to require documentation of the ADA-covered disability and the need for accommodation.

You will receive written notice if your application has been accepted or rejected. You will also be notified when and where to report to take an examination, if required. Applicants who meet all the job requirements are placed on an eligible register which may remain in effect up to two years, unless exhausted sooner. Please notify the Personnel Department of any changes in your name, address, telephone number(s) or email address. Prior to your employment you will be required to provide documentation of your identity and employment eligibility in order to comply with the Immigration Reform and Control Act of 1986. Applicants for certain jobs may be required to submit to a complete background check, or a conditional offer drug test or medical examination.

**Veteran's Preference.** Preference in open competitive examinations will be given for veterans, to their widow or widower and to the spouse of a totally disabled veteran. A veteran is defined as a person who served in the military service during any war or conflict in which the United States was engaged and who was discharged or released from service under conditions other than dishonorable. It does not include those who serve an initial period of active duty training in the Reserve or National Guard. Preference Points will be applied to the passing score in an open competitive examination. Veteran's Preference Points may be claimed on the Supplemental Applicant Data Form found on page 5 of this application.

**Equal Employment Opportunity:** Discrimination against any person in recruitment, examination, appointment, training, promotion, retention, discipline, or any other aspect of personnel administration because of political or religious affiliations or because of race, national origin, or any other non-merit factors is prohibited. Discrimination on the basis of age or sex or physical disability is prohibited except where specific age, sex, or physical requirements constitute a bona fide occupational qualification for proper and efficient administration.

Title of Position \_\_\_\_\_ Date Filed \_\_\_\_\_

Revised May 2007

Accepted	Rejected	Accepted	Rejected
Ed.: _____	_____	Test 1: _____	_____
Exp.: _____	_____	Test 2: _____	_____
Other: _____	_____	Final Rank: _____	_____

## TITLE OF POSITION

Name \_\_\_\_\_  
 Last First Middle

Address \_\_\_\_\_  
 Mailing Address

City State Zip Code

Telephone Numbers \_\_\_\_\_  
 Home Work Cell Email Address

	YES	NO		YES	NO
If you are under 18 years of age, can you provide required proof of your eligibility to work?	<input type="checkbox"/>	<input type="checkbox"/>	Are you currently on "lay-off" status and subject to recall?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been employed with us before? if yes give date, _____	<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been discharged or forced to resign	<input type="checkbox"/>	<input type="checkbox"/>
Are you currently employed?	<input type="checkbox"/>	<input type="checkbox"/>	On what date would you be available for work: _____		
May we contact your present employer?	<input type="checkbox"/>	<input type="checkbox"/>	Are you available to work: ( ) Full Time ( ) Part Time ( ) Shift Work ( ) Temporary		

References: List three reliable persons, not relatives or employers, who know you well enough to give information about you.

Name	Complete Address/Phone Number	Occupation

**Education Instructions:** Unless specifically stated on the job announcement, education or license requirements must be obtained by the closing date of the announcement. Applicants for positions which require a diploma, certificate, degree or special course work may be required to provide documentation. Please do not abbreviate the name of your school or major. Attach additional sheets if necessary.

High School Diploma ☐ Yes ☐ No

Highest Grade Completed \_\_\_\_\_

GED Certificate ☐ Yes ☐ No

GED Certificate number \_\_\_\_\_

Issued by \_\_\_\_\_

Name and location of high school \_\_\_\_\_

Name and location of college or technical school(s)	Completed Hours		Did you graduate?		Type of degree received	Major/Minor
	Quarter	Semester	Yes	No		

Profession or Technical Certificate or License:

Do you possess a valid Ala. Driver's License? ☐ No ☐ Yes CDL ☐ No ☐ Yes Class \_\_\_\_\_

**APPLICANT CERTIFICATION-** By submitting this application and any attachments, I hereby certify that these documents contain no false information and are complete, truthful and accurate to the best of my knowledge. I understand that I may be disqualified if I am not thorough and accurate in completing this form. I also understand that should an investigation disclose that I have given false or misleading information on this form or its attachments, my application may be rejected, my name may be removed from an eligible register and I may be disqualified from applying for future employment through the Montgomery City-County Personnel Department. If I am already employed, I may be dismissed from employment.

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## WORK HISTORY

**Work History Instructions: Please read carefully.** In the areas below please list all of your work experience, *beginning with your current or most recent job*. Military and related volunteer work should be included here. Please do not use abbreviations, initials or military jargon when stating your experience. **If you need more space, attach extra copies of this page.** Each time you change jobs or job titles, you should list them separately, even if your employer did not change. It is important that you provide complete and accurate information about the employer, the date of your employment, your job duties and your level of responsibility, including the number and title of any employees you supervised, equipment you operated and any other relevant information which will assist us in evaluating your qualifications for the job you are applying for. If you do not show the month and year you began and ended each job, you will not receive full credit for your experience.

Name of employer:	Dates employed ( <i>give month and year</i> )		Total Number of Months
Address:	From:     /     To:     /		
Telephone No.:	Salary or earnings:		Average Number of hrs. per wk.
Supervisor:	Starting \$                      per		
	Ending \$                      per		
Exact title of your job	No. and job titles of any employees you supervise(d)	Your reason for wanting to leave	

**DESCRIPTION OF WORK:**

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Name of employer:	Dates employed ( <i>give month and year</i> )		Total Number of Months
Address:	From:     /     To:     /		
Telephone No.:	Salary or earnings:		Average Number of hrs. per wk.
Supervisor:	Starting \$                      per		
	Ending \$                      per		
Exact title of your job	No. and job titles of any employees you supervise(d)	Your reason for wanting to leave	

**DESCRIPTION OF WORK:**

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Name of employer:	Dates employed ( <i>give month and year</i> )		Total Number of Months
Address:	From:     /     To:     /		
Telephone No.:	Salary or earnings:		Average Number of hrs. per wk.
Supervisor:	Starting \$                      per		
	Ending \$                      per		
Exact title of your job	No. and job titles of any employees you supervise(d)	Your reason for wanting to leave	

**DESCRIPTION OF WORK:**

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## WORK HISTORY

Name of employer:	Dates employed ( <i>give month and year</i> )	Total Number of Months
Address:	From:     /             To:     /	
Telephone No.:	Salary or earnings:	Average Number of hrs. per wk.
Supervisor:	Starting \$             per	
	Ending \$             per	

Exact title of your job	No. and job titles of any employees you supervise(d)	Your reason for wanting to leave
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### DESCRIPTION OF WORK:


Name of employer:	Dates employed ( <i>give month and year</i> )	Total Number of Months
Address:	From:     /             To:     /	
Telephone No.:	Salary or earnings:	Average Number of hrs. per wk.
Supervisor:	Starting \$             per	
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Exact title of your job	No. and job titles of any employees you supervise(d)	Your reason for wanting to leave
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Name of employer:	Dates employed ( <i>give month and year</i> )	Total Number of Months
Address:	From:     /             To:     /	
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Exact title of your job	No. and job titles of any employees you supervise(d)	Your reason for wanting to leave
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Name of employer:	Dates employed ( <i>give month and year</i> )	Total Number of Months
Address:	From:     /             To:     /	
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Supervisor:	Starting \$             per	
	Ending \$             per	

Exact title of your job	No. and job titles of any employees you supervise(d)	Your reason for wanting to leave
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### DESCRIPTION OF WORK:


**MONTGOMERY CITY AND COUNTY PERSONNEL DEPARTMENT  
SUPPLEMENTAL APPLICANT DATA FORM**

**TO THE APPLICANT:** The Civil Rights Act of 1964, as amended, prohibits discrimination in employment because of race, color, religion, sex or national origin. The Age of Discrimination in Employment Act (ADEA), as amended, prohibits discrimination because of age with respect to individuals who are at least 40 years of age. The information requested is used solely for Equal Opportunity reporting, personnel research, and for bona fide occupational qualifications or other legally permissible reasons, and will be kept in a **CONFIDENTIAL FILE** separate from the application for employment.

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**TITLE OF POSITION**

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**JOB ANNOUNCEMENT#**

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**NAME:**

**LAST**

**FIRST**

**MIDDLE**

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**SOCIAL SECURITY NUMBER**

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**DATE OF BIRTH**

☐ Male    ☐ Female    Citizen of USA or alien authorized to work in USA? ☐ Yes    ☐ No

Racial or ethnic group (check one):

☐ White    ☐ Black    ☐ Hispanic    ☐ Asian/Pacific Islander    ☐ American Indian

What prompted you to apply for City-County employment?

☐ Newspaper    ☐ AL State Employment Agency    ☐ Self-Initiated  
☐ Radio    ☐ City-County Employee    ☐ A Bulletin Board  
☐ Community Announcement    ☐ College Placement Office    ☐ Web Page  
☐ Other (Specify) \_\_\_\_\_    ☐ Jobline

**Veteran's Preference Points**

**If you claim Veteran's Preference**, check the type below. **Attach copies** (which will not be returned) of the required documents to your application to support your claim. See page one of the Montgomery City/County Personnel application for Veteran's Preference Policy.

☐ **Veteran** (5 points) - Available to a veteran, defined as a person who served in the active military during any war or conflict in which the U.S. was engaged and who was discharged or released from service under conditions other than dishonorable. **Requires DD214** or document showing dates of service and type of discharge. If this has been submitted previously and is on file with this office, you may disregard this requirement.

☐ **Disabled Veteran** (10 points) - Available to a veteran who has a service connected disability and who receives or is eligible to receive compensation for the disability. **Requires DD214** or other document as above and **letter of disability** from VA dated within last 6 months. VA letter must be kept updated or you lose the extra 5 points.

☐ **Disabled Veteran's spouse** (10 points) - Available to a person who is currently married to a veteran who is totally disabled and not qualified for employment. **Requires DD214** or other document as listed above and **VA letter of disability**.

☐ **Deceased Veteran's spouse** (10 points) - Available to the spouse of a veteran who died or was killed in the line of duty. **Requires DD1300** or other document as above and a **marriage certificate**. Cannot be claimed if spouse remarries.

☐ I **am not** eligible for Veteran's preference points.